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seems strange, but I have noticed over and over again that a clean collar, a tie and polished shoes, will elevate and invigorate a down and outer.

This is all, let us hope, history of the past; no more alcoholic wards, but it would seem unfair to close these lines without mentioning a nurse, who, if I remember rightly, was for over twenty years in charge of the alcoholic ward in the Bellevue Hospital—Miss C. She was one of those sweet, motherly women whom God meant to be a nurse. Always in good spirits, patient, yet firm and full of authority; I dare say she fully deserved the name of glorious calling, "Mother," among the class of unfortunates she served. There was not a soul discharged from her ward who did not get a friendly warning. Many times she patched up broken family ties; and a number of prodigal sons, who came to the city to sow their wild oats, can trace their eventual home-coming to her kind smile and earnest heart-to-heart talk.

If anybody ever should attempt to write the history of the Bellevue, Ward 30 would fill a chapter by itself, and so would Ward 44, the Prison Ward, but that's another story.

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## THE VALUE OF FRUIT IN INVALID DIET

BY ALICE URQUHART FEWELL

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Fresh fruits contain from 75 per cent. to 95 per cent. water, little or no fat or protein, and a large proportion of carbohydrate. The chief nourishment in fruit is derived from the carbohydrate. In ripe fruits this carbohydrate is in the form of various sugars and pectin, while in many fruits, in the unripe state, starch is found. Fruits contain various acids, and the flavor is partly due to oils and ethers present.

Fruits, when eaten fresh, are valuable for their acids and for the mineral matter which they contain. They also give bulk to the diet, which is an important factor. This is especially true of fruits which have been dried. Dried fruits also have a higher concentrated fuel value. The cooling, appetizing and refreshing qualities of fresh fruits give them an increased value in invalid diet.

Most fruits are at their best when served fresh and ripe in season. A few fruits cannot be eaten raw, and still others are more digestible when cooked. The digestibility of fruit is influenced by

idiosyncracies of different people. Some people can never eat strawberries or apples without suffering from indigestion, while others have no ill effects after eating these fruits. Oranges and peaches are among the fruits most easily digested by the majority of people. Peaches, plums and raspberries contain less sugar than most other fruits, and a knowledge of this fact may be useful to those living on a sugar restricted diet.

Nearly all fruits have a laxative effect. Apples act upon the liver and kidneys, and figs and prunes are both valuable laxatives. Pineapple is often given to diabetic patients. It contains a digestive ferment similar to pepsin, and has a decided effect on the digestion of proteids. Pineapple juice is given in diphtheria, and in cases of sore throat from other causes, and has a soothing effect on the mucous membranes of the throat. Bananas contain starch, and are therefore more digestible if cooked.

When fruit is selected for the invalid it must be fresh, ripe and firm. Fruit which is over-ripe should always be cooked before it is eaten. Raw fruit must be carefully washed, for germs on the skin will often cause digestive disturbance. With the exception of oranges, lemons and peaches, nearly all other fruits are better borne by invalids when cooked. For those of weak digestion the pulp and seeds of some fruits may prove irritating. In cases of this kind the juice may be expressed from the fruit, and served in the form of cooling beverages. The juice from nearly all berries is easily digested even in cases where the whole fruit could not be tolerated.

For the numerous reasons mentioned above, fruit plays an important part in invalid diet. It is necessary for the nurse to be versed in the art of preparing it in as many attractive ways as possible. There is, perhaps, no other article of food which lends itself so well to attractive methods of serving. A specimen of perfect ripe fruit is beautiful to look at, and it can be served in a way to appear even more attractive. Then, too, there are many ways of cooking fruit, and of combining it with other things to make dainty and appetizing dishes.

Oranges are more often used than almost any other fruit for the invalid, and they may be served in a number of ways to give variety. A patient soon tires of seeing the orange appear on the tray, simply cut in half and served with an orange spoon. Instead, try peeling the orange and arranging the quarters, which have been separated, on a plate in such a way that they represent the petals of a flower. In the center where the petals come together, put a mound of powdered sugar with a marischino cherry on top. This may be varied by peeling the orange in such a manner that a band

of skin, one-half inch wide, is left midway between the two ends. Separate the sections, cutting the band with a knife, and arrange around a mound of sugar with the skin portion up. The orange is picked up by this band of skin when eaten. If a patient tires of oranges and chilled orange juice, a baked orange may be given for a change. Cut an orange in half crosswise, place on a baking dish, sprinkle sugar on each half, and bake in a moderate oven until tender. This will take about 20 minutes. The orange may be served either hot or cold, and has a flavor somewhat resembling orange marmalade.

Baked peaches are delicious, and make a nice change after a patient has had the fresh fruit frequently enough to become tired of it. Peel a peach, cut it in half and remove the stone. Fill the cavity thus left with sugar and a few drops of lemon juice. Bake in a shallow pan for about 20 minutes, and serve hot or cold. Baked bananas make an attractive dessert to serve for luncheon. Remove the skin from a banana, and cut in half lengthwise. Put in a shallow pan with a little butter, lemon juice and sugar, and bake about 20 minutes in a moderate oven, basting several times with a mixture of sugar, water and lemon juice. Brown sugar makes an especially good combination with bananas, and a sauce made of butter and brown sugar creamed together gives the finishing touch to baked bananas when they are served hot.

Prunes are a very common article of invalid diet, and they are something one soon tires of, for they are nearly always served the same way,—stewed. When the doctor orders prunes for a patient, the nurse feels in duty bound to serve them stewed for breakfast. There are many attractive ways of cooking prunes besides stewing them, and they may also be served at other meals than breakfast. Even stewed prunes may be disguised in such a way that a patient will hardly recognize them. Rub hot stewed prunes through a colander, and stir this pulp into the breakfast cereal, beating vigorously until well blended. Serve as usual with cream and sugar. This makes a very pleasing addition to any hot breakfast cereal. Cold prune whip and prune soufflé are two methods of serving prunes as a dessert. Cook prunes until tender, and remove the stones. Rub them through a sieve, and mix this pulp lightly with white of egg which has been beaten until stiff. Sweeten to taste with sugar. Allow about one-half cup prune pulp to the white of one egg. More of the prune may be used if desired. This whip may be served cold with a custard sauce or it may be baked in the oven as a soufflé, and served hot. Frozen prune whip is very appetizing in warm weather. Use more sugar, and allow the mixture to stand in a small freezer packed with ice and salt. Do not use the crank or dasher of the

freezer, but stir occasionally with a spoon while freezing. Stuffed prunes are very attractive, and are generally liked by patients. Steam dried prunes until they swell and are tender. Cook these prunes for a minute in a heavy syrup made of equal parts of sugar and water. Allow them to dry for a while on oiled paper, then remove the stones, and stuff with nuts or pieces of marshmallow. They may also be stuffed with pieces of prune which have become broken. These prunes may be served after dinner as a bon-bon, or between meals with a glass of milk and a cracker.

The juice of many kinds of berries, which cannot always be served whole on account of their seeds, may be used to make cooling drinks. Strawberry juice is nice served in this manner. These drinks are sweetened with a sugar syrup which is made by boiling together equal parts of sugar and water, and then cooling. Drinks made from the juice of nearly all fruits are improved by the addition of a little lemon juice, and they must be served very cold.

When fresh fruits cannot be procured, we must rely on canned and preserved fruits. Practically all canned fruit, with the exception of pineapple, is greatly improved if it is cooked over for a few minutes after it is taken from the can. This cooking takes away that taste peculiar to canned fruits, and improves the flavor. A little lemon juice may be added before the cooking is done.

The recipes given above are only suggestions, and every nurse can think out many new ways of preparing fruit, for herself. If one thinks only of a different method of serving, it will mean much to the appearance of the tray, and to the appetite of the patient.

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That great discoveries are sometimes made through the simplest mediums is well known. It may not be generally known that the idea of a stethoscope was conceived by Dr. Rene Theophile Hyacinthe Laennec, a French doctor, during a visit to the Louvre in Paris. He noticed children at play in the garden, listening to the transmission of sound along pieces of wood. Thereafter he made a tube of paper, which he glued together, and experimented with his ward patients at the Neckar hospital.

The early Laennec stethoscopes were made to be used by one ear only, and this type is still largely in use in the countries of Europe. In America, however, a stethoscope to be used with both ears is much more generally employed.

It is interesting to note, in connection with the invention and early use of the stethoscope, that the bodies of patients in the hospitals at that time were so uncommonly dirty that the doctors were loth to put their ears to the chest of the sick one, in order to hear the sounds of the lungs.